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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)					
Eldon, Anthony, W, ,				0.0	and Control of November
(b) Address (number and street) 316 20th St East	☐ Check if address changed		Candidate's FEC Identification Number H2FL14236		
(c) City, State, and ZIP Code					ew Amended
Palmetto	FL	_ 3422	1	Statement X (1	N) OR (A)
4. Party Affiliation	5. Office Sought			rict of Candidate	
DEMOCRATIC PARTY	House		FL	14	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)					
NOTE: This designation should be filed with the appropriate office listed in the instructions.					
(a) Name of Committee (in full)					
Tony Eldon for Flori	da				
(b) Address (number and street)					
8761 N 56th St					
P.O. Box 292805					
(c) City, State, and ZIP Code					
Tampa			FL	33617	
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)					
(c) City, State, and ZIP Code					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Signature of Candidate				Date	
Eldon, Anthony, Warren, ,		[Elect	ronically Filed]	12/23/2020	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					
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FEC FORM 2 (REV. 02/2009)